

11324 U.S. PTO
07/23/03

PTO/SB/05 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 3946/1M812-US1		
		First Inventor Klaus Liedtke		
		Title SYSTEM AND METHOD FOR BANDOLIERING SYRINGES		
		Express Mail Label No.		
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <small>(Appendix)</small>		
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>		
3. <input checked="" type="checkbox"/> Specification [Total Pages 48] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <small>(if filed)</small>- Detailed Description- Claim(s) (37 claims, 3 independent claims)- Abstract of the Disclosure		a. <input type="checkbox"/> Computer Readable Form (CRF)		
		b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper		
		c. <input type="checkbox"/> Statements verifying identity of above copies		
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 14]		ACCOMPANYING APPLICATIONS PARTS		
5. Unexecuted Declaration/Power of Attorney Total Sheets 3		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
a. <input type="checkbox"/> Newly executed (original or copy)		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>		
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>		11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small>		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
		13. <input type="checkbox"/> Preliminary Amendment		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>		
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>		
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
		17. <input type="checkbox"/> Other: <input type="text"/>		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ Prior application information: Examiner _____ Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
19. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		07278 or <input checked="" type="checkbox"/> Correspondence address below		
Name		DARBY & DARBY P.C. David Leason, Esq.		
Address		P.O. Box 5257		
City		State	New York	
Country		Zip Code	10150-5257	
Telephone		(212) 527-7700	Fax (212) 753-6237	
Name (Print/Type)		Edward J. Ellis	Registration No. (Attorney/Agent)	40,389
Signature		Date		July 23, 2003

17613 U.S. PTO
10/626506
07/23/03

{M:\3946\1M812\00030381.DOC 10/626506}

0340066768-US

7/23/03

ent